

INTERNATIONAL MOBILITY

DECLARATION

The undersigned, _____, President/legal representative of
_____, under his/her sole responsibility,

CONFIRMS THAT

| | |
|------------------------|--|
| First Name | |
| Second Name | |
| Place of Birth | |
| Date of Birth | |
| Passport number | |
| Issued by | |
| Nationality | |
| Cell Phone | |
| Email | |
| WRF River Guide number | |

IS CERTIFIED, BY THE NATIONAL FEDERATION

“ _____ ”,
according to the *World Rafting Federation Training Programme For River Guide & Coach*

AS

- Class II River Guide
- Class III River Guide
- Class IV/A River Guide
- Instructor

- Assistant Coach
- Coach
- Head Coach
- Federal Senior Coach

Date _____

The President
